

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**

SERIAL NO. **10792340**

FILING DATE **03/03/04**

APPLICANT(S)

**CLAIMS**

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
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TOTAL IND. <b>3</b> TOTAL DEP. <b>13</b> TOTAL CLAIMS <b>16</b>						

  

	IND	DEP	IND	DEP	IND	DEP
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TOTAL IND. TOTAL DEP. TOTAL CLAIMS						